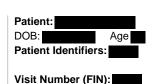


Inflammatory Bowel Disease Differentiation Panel



Sex:



ARUP Test Code: 3003748

Collection Date:

Received in lab

Completion Date:

Laboratory Test Analysis

Test Component	Patient Test Result	Flag	Flag Reference Interval	
S. cerevisiae Antibody, IgG	50.0	н	Negative 20.0 Units or less Equivocal 20.1 to 24.9 Units Positive 25.0 Units or greater	
S. cerevisiae Antibody, IgA	50.0	Н	Negative 20.0 Units or less Equivocal 20.1 to 24.9 Units Positive 25.0 Units or greater	
Atypical ANCA	1:1280	A	<1:20	

Test Profile Interpretation

Antibody profile is **suggestive** of Inflammatory Bowel Disease (IBD)

Profile consistent with Crohn Disease (CD)

Profile consistent with Ulcerative Colitis (UC)

Antibody profile is equivocal for IBD

Antibody profile is **not suggestive** of IBD; negative results do not rule out IBD

Additional Test Information

	IBD	CD	UC
Sensitivity	62.6%	55.0%	51.3%
Specificity	92.6%	93.0%	94.3%
Likelihood Ratio (+)	8.8	6.5	7.5
Likelihood Ratio (-)	0.4	0.5	0.5

Notes:

- Reese GE, Constantinides VA, Simillis C, Darzi AW,
 Orchard TR, Fazio VW, Tekkis PP. Diagnostic precision of
 anti-Saccharomyces cerevisiae ant bodies and perinuclear
 antineutrophil cytoplasmic antibodies in inflammatory bowel
 disease. Am J Gastroenterol. 2006;101(10):2410-22.
- Low sensitivities of ASCA and pANCA limit their use as screening tests, but their high specificities make them good adjunct tools in confirming a diagnosis of IBD.
- This report does not replace the use of clinical, imaging, and/or biopsy studies in making a final diagnosis of IBD.









Patient: ARUP Accession:

Inflammatory Bowel Disease Differentiation Panel

Patient: | Date of Birth: | Sex: | Physician: | Patient Identifiers: | Visit Number (FIN): | Patient Identifiers: | Patient Identifiers: | Patient Identifiers: | Physician: | Physician: | Patient Identifiers: | Physician: | Ph

Vasculitis Information

Atypical perinuclear ANCA (atypical p-ANCA) staining pattern observed. Presence of p-ANCA ruled out on formalin-fixed neutrophils. This staining pattern is associated with inflammatory bowel diseases, particularly ulcerative colitis. It may also be seen in primary sclerosis cholangitis.

Interpretive Information

Anti-Neutrophil Cytoplasmic Antibodies:

Neutrophil Cytoplasmic Antibodies (C-ANCA = granular cytoplasmic staining, P-ANCA = perinuclear staining) are found in the serum of over 90 percent of patients with certain necrotizing systemic vasculitides, and usually in less than 5 percent of patients with collagen vascular disease or arthritis.

S. cerevisiae Antibody, IgA and IgG:

Saccharomyces cerevisiae IgG antibodies are found in 60-70 percent of Crohn disease (CD) patients and 10-15 percent of ulcerative colitis (UC) patients. Saccharomyces cerevisiae IgA antibodies are found in about 35 percent of CD patients but less than 1 percent of UC patients. Detection of both Saccharomyces IgG and IgA antibodies in the same serum specimen is highly specific for CD.

Atypical p-ANCA:

Atypical p-ANCA antibodies are found in 50-70 percent of patients with ulcerative colitis (UC) and in about 20 percent of individuals with Crohn disease (CD).









Patient: ARUP Accession: